| PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004        |  |   |  |                   |  |                                  |           |                                       | Application or Docket Number $10/653308$ |               |                            |                        |
|---|--|---|--|-------------------|--|----------------------------------|-----------|---------------------------------------|--|---------------|----------------------------|------------------------|
| CLAIMS AS FILED - PART I  |  |   |  |                   |  |                                  | SMALL ENT |                                       |  | OR            | OTHER THAN<br>SMALL ENTITY |                        |
| ·   |  |   | (Column 1)                                       |                   | (0                                     | Column 2)                        |           |                                       |  |               | <del></del>                |                        |
| U.S. NATIONAL STAGE FEES  |  |   | ·  |                   | <u> </u>                               |                                  |           | ATE                                   | FEE                                      |               | RATE                       | FEE                    |
| BASIC FEE   |  |   | SMALL ENT.                                       | VLL ENT. = \$ 160 |  | LARGE ENT. = \$ 300              |           | C FEE                                 |  | OR            | BASIC FEE                  |                        |
| EXAMINATION FEE   |  |   | Satisfies PCT Article 33(1)-<br>(4) = \$50/\$100 |                   | All other situations = \$ 100 / \$ 200 |                                  | EXAM      | l FEE                                 |  |               | EXAM. FEE                  | ·                      |
| SEARCH FEE  |  |   | U.S. is ISA = \$  ALL other cour \$ 200 / \$ 4   | ntries =          | Allott                                 | her situations =<br>260 / \$ 500 | SEAR      | CH FEE                                |  |               | SEARCH FEE                 |                        |
| FEE FOR EXTRA SPEC. PGS.  |  |   | minu   | is 100 =          |  | / 50 ≐                           | X         | 125 =                                 |  |               | X \$ 250 =                 |                        |
| TOTAL CHARGEABLE CLAIMS   |  |   | min  | nus 20 =          |  |                                  | x         | \$ 25 =                               |  | OR            | X \$ 50 =                  | ·                      |
| INDEPENDENT CLAIMS  |  |   | m  | inus 3 =          | • •                                    |                                  | X         | 100 =                                 |  | OR            | X \$ 200 =                 |                        |
| MUL   | TIPLE DEPEND                                   | ENT CLAIM PRI                             | ESENT  |                   |  |                                  | + \$      | 180 =                                 | ·  | OR            | + \$ 360 =                 |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2      |  |   |  |                   |  | lumn 2                           | T         | OTAL                                  |  | OR.           | TOTAL                      |                        |
| CLAIMS AS AMENDED - PART II  / 0 - / 6 - 0 6 (Column 1) (Column 2) (Column 3) |  |   |  |                   |  | (Column 3)                       | s         | ·                                     |  | OTHER SMALL E |                            |                        |
| NTA   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | NUN<br>PREVI      | HEST<br>MBER<br>OUSLY<br>FOR           | PRESENT<br>EXTRA                 | f         | RATE                                  | ADDI-<br>TIONAL<br>FEE                   |               | RATE .                     | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT   | Total  | . 25                                      | Minus  | 2                 | 8                                      |                                  | х         | \$ 25 =                               |  | OR            | X \$ 50 =                  |                        |
| AME   | Independent                                    | . 8.                                      | Minus  |                   | 3                                      | - 5                              | X         | 100 =                                 | 500                                      | OR            | X \$ 200 =                 |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |                   |  |                                  | +\$       | 180 =                                 |  | OR            | + \$ 360 =                 |                        |
|   |  |   |  |                   |  |                                  |           | AL ADDIT.<br>FEE                      | 500                                      | OR            | TOTAL ADDIT.<br>FÉE        |                        |
|   |  |   |  |                   |  |                                  |           |                                       |  |               |                            |                        |
| <u> </u>  | <del></del>                                    | (Column 1) CLAIMS                         | 7  |                   | mn 2)<br>HEST                          | (Cotumn 3)                       | <b></b>   | · · · · · · · · · · · · · · · · · · · |  |               | <del></del>                |                        |
| 47 B  |  | REMAINING - AFTER AMENDMENT               |  | NUM<br>PREVI      | IBER<br>IOUSLY<br>FOR                  | PRESENT<br>EXTRA                 |           | RATE                                  | ADDI-<br>TIONAL<br>FEE                   |               | RATE                       | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT B   | Total  | •   | Minus  | **                |  | ÷                                | X         | \$ 25 =                               |  | OR            | X \$ 50 =                  |                        |
| AME   | Independent                                    | •   | Minus  | ***               | •                                      |                                  | X         | 100 =                                 |  | OR            | X \$ 200 =                 |                        |
| L   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |                   |  |                                  |           | 180 =                                 |  | OR            | + \$ 360 =                 |                        |
|   |  |   |  |                   |  |                                  | TOT       | AL ADDIT.<br>FEE                      |  | OR            | TOTAL ADDIT.               |                        |
| ŀ   |  |   |  | :                 |  | ٠                                | •         |                                       | •  | - ,           |                            |                        |

<sup>\*</sup> If the entry in column 1 is less than the entry in column 2, write "0" in column 3. .

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

<sup>\*\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.